The minimum clinical criteria To be accurately diagnosed (certified) with type 2 diabetes as a 70-year-old Latina woman in the United States generally involve objective laboratory tests rather than just symptom presentation. According to current clinical guidelines:

- **Glycated hemoglobin (A1C) test**: An A1C value of **6.5% or higher on two separate occasions** strongly supports a diagnosis of type 2 diabetes.
- **Fasting plasma glucose (FPG)**: A fasting blood glucose level of **126 mg/dL (7.0 mmol/L) or higher on two separate tests** also meets diagnostic criteria.
- **Random plasma glucose test**: A random glucose of **200 mg/dL (11.1 mmol/L) or higher with classic symptoms** of diabetes (such as frequent urination and excessive thirst) can confirm diagnosis even without fasting.
- **Oral glucose tolerance test (OGTT)**: A 2-hour plasma glucose of **200 mg/dL or higher** after a 75-gram glucose load is diagnostic, especially in older adults where A1C and fasting glucose may be less sensitive.

Because aging and ethnicity (including can affect the accuracy of A1C measures, guidelines suggest screening with both A1C and fasting glucose, and often performing an OGTT when results are borderline or inconclusive.

Presence of typical symptoms such as polyuria, polydipsia, fatigue, and blurred vision alongside elevated glucose levels strengthens clinical suspicion but is not sufficient alone for diagnosis without confirmatory blood tests[4].

In clinical practice, particularly for older adults, two abnormal tests on separate occasions are preferred to avoid misclassification due to transient factors or comorbidities affecting test reliability. Given this patient's age, functional status and life expectancy are also considered in deciding the intensity of diagnosis and management

Summary:

- Confirmed diagnosis requires at least one of these on two separate occasions:
  - A1C ≥ 6.5%
  - Fasting glucose ≥ 126 mg/dL
  - 2-hour OGTT glucose ≥ 200 mg/dL
- Or a random glucose ≥ 200 mg/dL plus diabetes symptoms
- Symptoms alone are insufficient without lab confirmation.
- For older adults and Latina women, combined testing is important due to diagnostic variability.